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## BIB DATA SHEET

CONFIRMATION NO. 7430

<b>SERIAL NUMBER</b> 10/570,122	<b>FILING or 371(c) DATE</b> 02/28/2006 <b>RULE</b>	<b>CLASS</b> 424	<b>GROUP ART UNIT</b> 1647	<b>ATTORNEY DOCKET NO.</b> ARS.122	
<b>APPLICANTS</b> Christine Power, Thoiry, FRANCE; Yan Lavrovsky, Brookline, MA; <b>** CONTINUING DATA *****</b> This application is a 371 of PCT/EP04/52077 09/07/2004 /RMD/ <b>** FOREIGN APPLICATIONS *****</b> EUROPEAN PATENT OFFICE (EPO) 03102723.8 09/08/2003 /RMD/ <b>** IF REQUIRED, FOREIGN FILING LICENSE GRANTED **</b> 01/29/2007					
Foreign Priority claimed <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No 35 USC 119(a-d) conditions met <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No Verified and /REGINA M DEBERRY/ Acknowledged Examiner's Signature	<input type="checkbox"/> Met after Allowance Initials	<b>STATE OR COUNTRY</b> FRANCE	<b>SHEETS DRAWINGS</b> 3	<b>TOTAL CLAIMS</b> 21	<b>INDEPENDENT CLAIMS</b> 1
<b>ADDRESS</b> SALIWANCHIK LLOYD & SALIWANCHIK A PROFESSIONAL ASSOCIATION PO Box 142950 GAINESVILLE, FL 32614 UNITED STATES					
<b>TITLE</b> Treatment of fibrotic disease					
<b>FILING FEE RECEIVED</b> 950	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:		<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit		